CRITERIA FOR PRIOR AUTHORIZATION

Buphenyl® (sodium phenylbutyrate)

PROVIDER GROUP Pharmacy

MANUAL GUIDELINES The following drug requires prior authorization:

Sodium Phenylbutyrate (Buphenyl)

CRITERIA FOR BUPHENYL Must meet all of the following:

• Patient must have a urea cycle disorder

- Must not be used for management of acute hyperammonemia
- Patient must weigh ≥20 kg
- Patient must be on a protein restrictive diet
- Dose must not exceed 20 grams per day

LENGTH OF APPROVAL

12 months